

County: Dane
FOUR WINDS MANOR
303 SOUTH JEFFERSON

Facility ID: 3480

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VERONA 53593 Phone:(608) 845-6465
Owned from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 67
Total Licensed Bed Capacity (12/31/02): 71
Number of Residents on 12/31/02: 61

Ownership:
Highest Level License: Skilled
Operate in Conjunction with CBRF? Yes
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 61

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
-----			-----				-----		
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		42.6	
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		37.7	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	9.8	More Than 4 Years		19.7	
Day Services	No	Mental Illness (Org./Psy)	18.0	65 - 74	14.8			-----	
Respite Care	No	Mental Illness (Other)	4.9	75 - 84	36.1			100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	27.9	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.6	95 & Over	11.5	Full-Time Equivalent			
Congregate Meals	No	Cancer	4.9		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	6.6		100.0	(12/31/02)			
Other Meals	No	Cardiovascular	24.6	65 & Over	90.2	-----			
Transportation	No	Cerebrovascular	13.1	-----	-----	RNs		8.9	
Referral Service	No	Diabetes	4.9	Sex	%	LPNs		9.3	
Other Services	No	Respiratory	4.9	-----	-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	16.4	Male	23.0	Aides, & Orderlies			
Mentally Ill	No	-----	-----	Female	77.0	50.5			
Provide Day Programming for			100.0		-----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care		
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
Skilled Care	7	100.0	362	33	91.7	124	0	0.0	0	0.0	165	0	0.0	0	2	100.0	145	58	95.1	
Intermediate	---	---	---	3	8.3	104	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	3	4.9	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	7	100.0		36	100.0		0	0.0			16	0	0.0		2	100.0		61	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							

Percent Admissions from:		Activities of		%	% Needing Assistance of		% Totally		Total
		Daily Living (ADL)		Independent	One Or Two Staff		Dependent		Number of Residents
Private Home/No Home Health	4.8	Bathing		1.6	85.2		13.1		61
Private Home/With Home Health	1.9	Dressing		8.2	78.7		13.1		61
Other Nursing Homes	4.8	Transferring		21.3	65.6		13.1		61
Acute Care Hospitals	80.0	Toilet Use		21.3	67.2		11.5		61
Psych. Hosp.-MR/DD Facilities	0.0	Eating		82.0	13.1		4.9		61
Rehabilitation Hospitals	3.8	*****							
Other Locations	4.8								
Total Number of Admissions	105	Continence			%	Special Treatments		%	
Percent Discharges To:		Indwelling Or External Catheter			3.3	Receiving Respiratory Care		0.0	
Private Home/No Home Health	1.0	Occ/Freq. Incontinent of Bladder			39.3	Receiving Tracheostomy Care		0.0	
Private Home/With Home Health	40.0	Occ/Freq. Incontinent of Bowel			6.6	Receiving Suctioning		0.0	
Other Nursing Homes	8.0					Receiving Ostomy Care		3.3	
Acute Care Hospitals	8.0	Mobility				Receiving Tube Feeding		4.9	
Psych. Hosp.-MR/DD Facilities	1.0	Physically Restrained			14.8	Receiving Mechanically Altered Diets		32.8	
Rehabilitation Hospitals	1.0								
Other Locations	15.0	Skin Care				Other Resident Characteristics			
Deaths	26.0	With Pressure Sores			1.6	Have Advance Directives		100.0	
Total Number of Discharges		With Rashes			0.0	Medications			
(Including Deaths)	100					Receiving Psychoactive Drugs		62.3	

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities									

		This Facility	Ownership:		Bed Size:		Licensure:		
			Proprietary		50-99		Skilled		All
		%	Peer Group		Peer Group		Peer Group		Facilities
			%	Ratio	%	Ratio	%	Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds		85.9	84.7	1.01	87.1	0.99	85.3	1.01	85.1 1.01
Current Residents from In-County		91.8	81.6	1.12	81.5	1.13	81.5	1.13	76.6 1.20
Admissions from In-County, Still Residing		20.0	17.8	1.13	20.0	1.00	20.4	0.98	20.3 0.98
Admissions/Average Daily Census		172.1	184.4	0.93	152.3	1.13	146.1	1.18	133.4 1.29
Discharges/Average Daily Census		163.9	183.9	0.89	153.5	1.07	147.5	1.11	135.3 1.21
Discharges To Private Residence/Average Daily Census		67.2	84.7	0.79	67.5	1.00	63.3	1.06	56.6 1.19
Residents Receiving Skilled Care		95.1	93.2	1.02	93.1	1.02	92.4	1.03	86.3 1.10
Residents Aged 65 and Older		90.2	92.7	0.97	95.1	0.95	92.0	0.98	87.7 1.03
Title 19 (Medicaid) Funded Residents		59.0	62.8	0.94	58.7	1.01	63.6	0.93	67.5 0.87
Private Pay Funded Residents		26.2	21.6	1.22	30.0	0.87	24.0	1.09	21.0 1.25
Developmentally Disabled Residents		0.0	0.8	0.00	0.9	0.00	1.2	0.00	7.1 0.00
Mentally Ill Residents		23.0	29.3	0.78	33.0	0.69	36.2	0.63	33.3 0.69
General Medical Service Residents		16.4	24.7	0.66	23.2	0.71	22.5	0.73	20.5 0.80
Impaired ADL (Mean)		42.3	48.5	0.87	47.7	0.89	49.3	0.86	49.3 0.86
Psychological Problems		62.3	52.3	1.19	54.9	1.13	54.7	1.14	54.0 1.15
Nursing Care Required (Mean)		5.3	6.8	0.79	6.2	0.86	6.7	0.79	7.2 0.74